| No. C 107626   | Due no later than Sep 30, 2000   | 2. Registered Agent and Office NO PO BOX |
|--|--|--|
| Return to:   | Annual Report Form   | JAY L ASHTON                             |
| SECRETARY OF STATE   | <ol> <li>Mailing Address - Correct in this box, if applicable</li> </ol> | 226 E 5TH AVE                            |
| 700 WEST JEFFERSON   | JAY L. ASHTON INSURANCE AGENCY, INC                                      | 220 L SITIAVE                            |
| PO BOX 83720   | JAY L ASHTON   | MEDIDIAN ID 93643                        |
| BOISE, ID 83720-0080   | 226 E 5TH AVE  | MERIDIAN, ID 83642                       |
| ,,   |  |  |
| NO FILING FEE IF   | MERIDIAN, ID 83642   | 3. New Registered Agent Signature        |
| RECEIVED BY DUE DATE   | INCINENTIAL BOOKE  |  |
|  |  |  |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors. |  |  |
| Office held Name   | Street or P.O. Address  ON 226 E. 5Th ave  MEM  SITON 11 11 11 11 11     | , State Zip                              |
| PORIS TOU ASILT  | no 226 E. 5Th ave Men  | oian Ed. 83642                           |
| Tres. Jay riski  | by and a similar   | 03072                                    |
| l Sec Junell A   | SUTON 1' 1' 1'   | /( //                                    |
|  |  |  |
| Organized Under the Laws of:   | 6.   | _  |
|  | Signature Aug ( Station  | Date <u>7-19-00</u>                      |
| IDAHO  | Olymature  | Date                                     |
| C 107626   | Name (Typed or Jay ASATOM  | Title: Pres.                             |
| Issued 07/10/2000  |  |  |
| 155ued 07/10/2000  | Do Not Tape or Staple  | 1921                                     |